

Work Order ID 95011

95011

Page 1

January-02-13 11:50:24 AM

Item ID: D350-748-201

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 1/21/13 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: *MLJ* Date: *13-01-03* Tooling: _____ Date: _____

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start *NR1*

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
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D350-748-241	G
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100

0.00

100

DOCUMENT CONTROL

DC

Memo

0.00

Document Control

Photocopy bluefile & type labels per PPPD350-748-201

CHG003

DAS 06 8/5/08

110

0.00

110

BENDING MACHINE - CROSSTUBES

CNC Bend 2

Memo

0.00

CNC Alpha 160 Bender

Bend tube as per Dwg D350-748-241 using CNC bender program D350A and Folio FT

*****UNDER BEND .225" PER SIDE*****

*****USE (4) DT9824 SHIM BLOC TO CHECK STRAIGHTNESS*****

Handwritten signature/initials

13-3-11

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 95011

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Page 2

January-02-13 11:50:24 AM

Item ID: D350-748-201

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 1/21/13 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: Date: Tooling: Date:

Run Start *NR1*

QC: Date: SPC (Y/N): Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120 *120* QC Quality Control	QC15- Crosstube Dimensional Check Memo ***USE (4) DT9824 SHIM BLOC TO CHECK STRAIGHTNESS***	0.00 0.00							
125 *125* HandFXtube Hand Finishing Crosstubes	Memo ***Stress relief*** Heat treat crosstube as per QSI010 4.3 Temp: _____ Start time: _____ Finish time: _____	0.00 0.00							
127 *127* QC Quality Control	QC15- Crosstube Dimensional Check Memo	0.00 0.00							

128

at ctd at height on FAE shut

13-03-18

verli leicht 31.460 ac is inspektor

verli twist 8.02411 ac is inspektor

DAS 16

13/03/18

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																								
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Work Order ID 95011

95011

Page 3

January-02-13 11:50:24 AM

Item ID: D350-748-201

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 1/21/13 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: Date: Tooling: Date:

Run Start *NR1*

QC: Date: SPC (Y/N): Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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130

0.00

130

Crosstubes

Crosstubes

Memo

0.00

Crosstubes

1-Drill Tube as per Dwg D350-748-241 Using DT8876 Drill Jigs,
Set-up drill table as per QSI 010

2-Deburr

3-Engrave Part # and Batch # as per Dwg D350-748-241

4-Remove all marks from tube within limits of D350-748-241

5- Apply a light coat of LPS3 on the interior of tube
Batch: _____

Mo/Rm 13/03/18
JW 13-03-18

140

QC6- Inspect dimensions to drawing

0.00

140

QC

Memo

0.00

Quality Control

DAS 16 13/03/20

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
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Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
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Work Order ID 95011

95011

Page 4

January-02-13 11:50:24 AM

Item ID: D350-748-201

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 1/21/13 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: Date: Tooling: Date:

Run Start *NR1*

QC: Date: SPC (Y/N): Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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150

Outsource process-Cadplate per QSI017 4.1.9.1

0.00

150

Outsource3

Memo

0.00

Outsource process - Cad plate

Issue P/O:

19388

Stress relief at 375° for 5 hours

Magnetic Particle Inspect per ASTM E1444

Cadium Plate per AMS-QQ-P-416B, Class 1, Type 2

Embrittle relief at 375° for 8 hours, Chromate Treat

Possible Supplier: Southwest United Industries

Ensure Certificate of Conformity is attached

CL 13/03/21 ①

Po 19783 CL 13/05/03 ①

160

Receive & Inspect for Damage & Mat'l Certs

0.00

160

Packaging

Memo

0.00

Packaging

Ensure certificate of conformity is attached

IX 1/23/12 ① SP
B-4-11

170

QC5- Inspect part completeness to step on W/O

0.00

170

QC

Memo

0.00

Quality Control

Reinspect Reprints

0136503

DAS 16 13/04/14

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

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Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
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Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Work Order ID 95011

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Page 5

January-02-13 11:50:24 AM

Item ID: D350-748-201

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 1/21/13 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: Date: Tooling: Date:

Run Start *NR1*

QC: Date: SPC (Y/N): Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
172		0.00							
172									
Crosstubes	Memo	0.00							
Crosstubes	***LOAD TEST TO 3000LB FOR 1 MINUTE***								
174	Outsource process - NDT per QSI038 4.1	0.00							
174									
Outsource2	Memo	0.00							
Outsource process - NDT									
176	Receive & Inspect for Damage & Mat'l Certs	0.00							
176									
Packaging	Memo	0.00							
Packaging									

13-4-12
9/13/4/12

1
13/05/16

P/O: 19585
P/O: 19926

13/04/15
13/08/17

13/4/16
13/10/17

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

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Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
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FAULT CATEGORY			
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

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Page 6

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Item ID: D350-748-201

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Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 1/21/13 Req'd Qty: 1.00 *1*

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Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
178	QC5- Inspect part completeness to step on W/O	0.00							
178									
QC	Memo	0.00							DAS 05 13-05-18
Quality Control									
180	SprayPaint	0.00							
180									
SprayPaint	Memo	0.00							
Spray Painting	1-Prime inside crosstube as per QSI 005 4.2 2-Paint Outside of Tube as per Dart QSI 005 4.2 125263 125473								J.P. / m 13-05-19
190	QC14- Inspect Spray Paint	0.00							
190									
QC	Memo	0.00							
Quality Control	Then, Wrap in plastic bag to protect from scratches								

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">Skid-tube <input type="checkbox"/></td> <td style="width: 25%;">Crosstube <input type="checkbox"/></td> <td style="width: 25%;">Water Jet <input type="checkbox"/></td> <td style="width: 25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																								
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>																								
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>																								
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																									
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector																		
Doc/Data <input type="checkbox"/>																											
Equip/Tooling <input type="checkbox"/>																											
Operator <input type="checkbox"/>																											
Material <input type="checkbox"/>																											
Setup <input type="checkbox"/>																											
Other <input type="checkbox"/>																											
Process <input type="checkbox"/>																											
Supplier <input type="checkbox"/>																											
Training <input type="checkbox"/>																											
Unapproved <input type="checkbox"/>																											
FAULT CATEGORY																											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other																

Work Order ID 95011

95011

Page 7

January-02-13 11:50:24 AM

Item ID: D350-748-201

Accept

N900040100

Setup Start

NS1

Revision ID:

Stop

NS2

Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13

Start Qty: 1.00

1

Cust Item ID:

Required Date: 1/21/13

Req'd Qty: 1.00

1

Customer:

Reference:

Run Start

NR1

Stop

NR2

Approvals:

Process Plan:

Date:

Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

200

0.00

200

Crosstubes

Crosstubes

Crosstubes

Memo

0.00

1-Install Ground wire Insert, then insert screw and washer

2-Abrade mating surfaces of support and crosstube with 400 grit sandpaper, clean the area with 4105S wash 'n' wipe

3-Install supports with Proseal 890 per and QSI 015

A/R Proseal 890 Batch: 124856

4-Install supports clamps Using Dt8876 as per Dwg D350-748-241, Torque to 60-80 IN-LBS

1 0 0 13-5-22

210

210

QC

Quality Control

QC5- Inspect part completeness to step on W/O

0.00

inspect only after 72 hours.

Memo

after install of clamps

0.00

27 13527

8 13/1/13

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

95011

January-02-13 11:50:24 AM

N900040100

Setup Start *NS1*

Stop *NS2*

Cust Item ID:

Start Date: 1/21/13 **Start Qty:** 1.00 ***1***

Customer:

Required Date: 1/21/13 **Req'd Qty:** 1.00 *** 1 ***

Reference:

Run Start *NR1*

Approvals: **Process Plan:** _____ **Date:** _____ **Tooling:** _____ **Date:** _____

Stop *NR2*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Insp. Stamp

0.00

220

Memo

0.00

Packaging

Packaging

QC4- 100% Inspect kits for completeness

0.00

230

Memo

0.00

QC

Quality Control

0.00

240

Packaging

0.00

Packaging

Packaging

Memo

Identify and pack for shipping as per PPPD350-748-201

Location:

PPP Rev:

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </td> <td style="width: 33%;"> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </td> <td style="width: 33%;"> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </td> <td style="width: 33%;"> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </td> </tr> </table>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>
Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>			

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		
<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Work Order ID 95011***95011***

Page 9

January-02-13 11:50:24 AM

Item ID: D350-748-201

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 1/21/13 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
250	QC21- Final Inspection - Work Order Release	0.00							
250									
QC	Memo	0.00							
Quality Control									

MC 13-05-31

W 13-05-31

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Picklist Print

January-02-13 11:50:24 AM

Page 1

Work Order ID: 95011

Parent Item: D350-748-201

Parent Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13

Required Date: 1/21/13

Start Qty: 1.00

Required Qty: 1.00

Comments:

IPP Rev: A New Issue 06-07-05 JLM

IPP Rev: B Update qty of MS21042L5 06-09-12 KJ

IPP Rev C Combined manufacturing 08.04.02 EC verified by: DD

IPP Rev:D 08-06-24 revD as per dwg DD verified by:EC

IPP Rev: E 08.12.11 Step17 was step 21 KJ Verified by:EC IPP Rev:F 10.08.04 added QSI010

4.3 DD verf:EC

IPP REV:G ADD UNDER BEND COMMENT 12-05-28 JLM IPP

REV:H 12.11.05 as per dwg D350-748-141G DD verf:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
ALS4-1032-225 Insert		Purchased	No			200	Each	1,476.0000	1	1		13-5-20	

Location

Loc Qty

Loc Code

FP001

1476

118386

55

118966

68

120410

10

120451

13

121269

77

122290

253

122827

1000

AN4-41A

Bolt

Purchased

No

220

Each

404.0000

Location

Loc Qty

Loc Code

ST359

73

123346

73

ST515

331

120423

150

121185

181

AN4-6A

Bolt

Purchased

No

220

Each

3,808.0000

Location

Loc Qty

Loc Code

ST355

324

123355

324

ST514

3484

123355

3484

13/05/27

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Picklist Print

January-02-13 11:50:24 AM

Page 2

Work Order ID: 95011

Parent Item: D350-748-201

Parent Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13

Required Date: 1/21/13

Start Qty: 1.00

Required Qty: 1.00

AN532A Bolt Purchased No 220 Each 3.0000

Location Loc Qty Loc Code

ST337 3

123831 3

AN960JD10 Washer Purchased No 124392 200 Each 0.0000

AN960JD41 Washer Purchased No 220 Each 0.0000

AN960JD516 Washer Purchased No 220 Each 2.0000

Location Loc Qty Loc Code

ST504 2

1069059 2

D3500-1 Saddle Manufactured No 220 Each 99.0000

Location Loc Qty Loc Code

ST423 99

85421 19

86763 26

88346 22

89220 12

90055 12

90734 8

D3501-1 Bushing Manufactured No 220 Each 171.0000

Location Loc Qty Loc Code

ST043 171

74866 11

86913 160

13/05/27

January-02-13 11:50:24 AM

Shop Packet Print

Page 2

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY			
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Picklist Print

January-02-13 11:50:24 AM

Page 3

Work Order ID: 95011

Parent Item: D350-748-201

Parent Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13

Required Date: 1/21/13

Start Qty: 1.00

Required Qty: 1.00

D3502-1 Manufactured No

200 Each 79.0000

2

2

AB 13-5-22

95130

Location

Loc Qty

Loc Code

LG050

7

77041

7

LG051

72

73419

3

74873

1

86876

44

88465

24

②

D350-748-241TRN
Crosstube Turning Detail

Manufactured No

110 Each 2.0000

1

SA 13-03-11

Location

Loc Qty

Loc Code

LG014

2

79392

1

86988

1

394969

①

D3595-063-395
RUBBER CUSHION

Manufactured No

200 Each 34.0000

2

2

AB 13-5-22

95060

Location

Loc Qty

Loc Code

FG

5

87353

5

LG051

29

87353

17

88333

12

②

January-02-13 11:50:24 AM

Shop Packet Print

Page 3

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Picklist Print

January-02-13 11:50:24 AM

Page 4

Work Order ID: 95011

Parent Item: D350-748-201

Parent Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13

Required Date: 1/21/13

Start Qty: 1.00

Required Qty: 1.00

MS21042L4

Purchased

No

220

Each

5,091.0000

24

24

Nut

52

Location

Loc Qty

Loc Code

FP001	318	
122452	306	
8182	12	
FP-001	12	
8182	12	
GA	231	
121444	231	
ST314	3030	
119017	20	
123021	510	
123248	900	
123355	1600	
ST506	1500	
123900	1500	

125535

M.H.

5

MS21042L5

Purchased

No

220

Each

1,426.0000

4

4

Nut

50

Location

Loc Qty

Loc Code

ST314	726	
108827	4	
116105	1	
116548	43	
119109	20	
121652	16	
122452	630	
2937	12	
ST506	700	
123900	700	

123 900

M.H.

5

January-02-13 11:50:24 AM

Shop Packet Print

13/05/27

Page 4

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Picklist Print

January-02-13 11:50:24 AM

Page 5

Work Order ID: 95011

Parent Item: D350-748-201

Parent Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13

Required Date: 1/21/13

Start Qty: 1.00

Required Qty: 1.00

MS21920-22

Purchased

No

200

Each

56.0000

2

2

Clamp(per MIL-DTL-8783C)

Location

Loc Qty

Loc Code

LG050

56

116207

7

117506

1

118186

8

119545

1

120631

3

122838

36

②

AS 13-5-22

MS27039-1-10

Purchased

No

200

Each

307.0000

1

1

Screw

Location

Loc Qty

Loc Code

GA

100

120449

100

ST305

207

122815

207

①

AS 13-5-22

January-02-13 11:50:24 AM

Shop Packet Print

Page 5

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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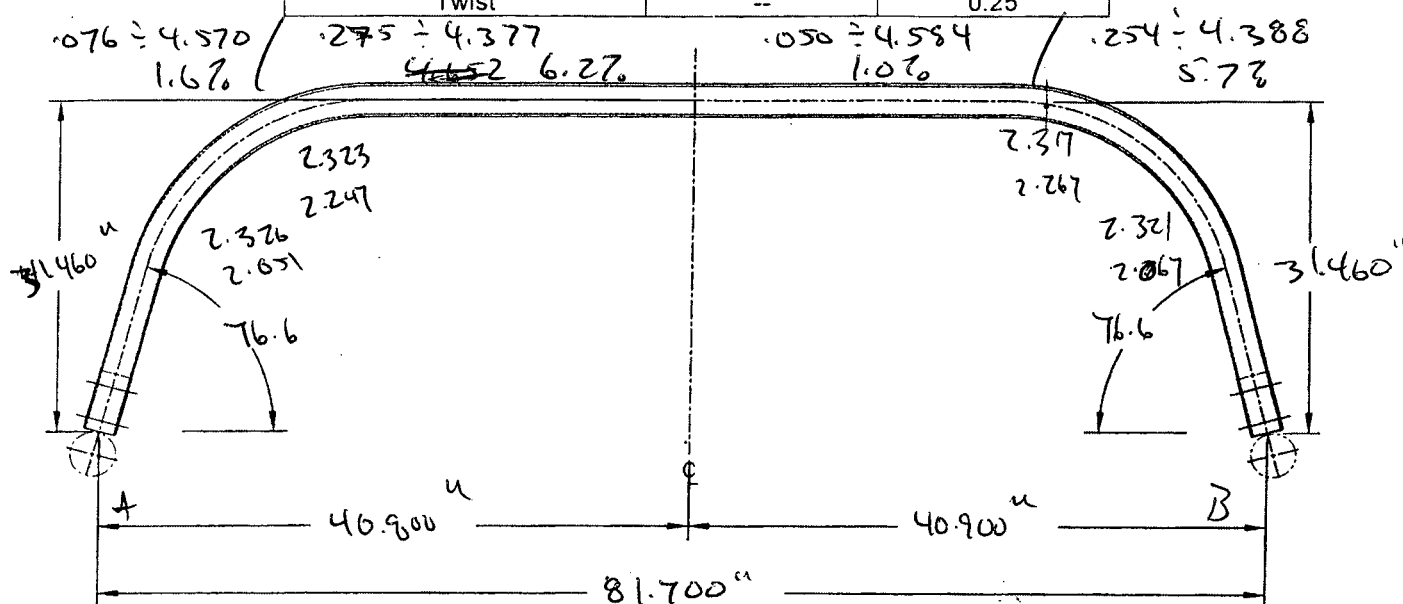
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
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<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
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		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

DART AEROSPACE LTD		Work Order:	95011
Description: Crosstube High Aft (AS350/355)		Part Number:	D350-748-201
Inspection Dwg: D350-748-241	Rev: E G <i>[Signature]</i>	Page 1 of 1	

Required Dimension	Min	Max
Height	31.22	31.48
1/2 Span	40.77	41.03
Angle	75	77
Total Span	81.54	82.06
Bending Passes	7	--
Crushing	--	6%
Twist	--	0.25



	Side A	Side B
Bending Passes		
Crushing		
Comments		
Side A = 1.6% at top + 6.27% at Bottom		
Side B = 1.07% at top + 5.77% at Bottom		

QC15 Inspection	
Date	DAS 16 / 13/3/14

Rev	Date	Change	Revised by	Approved
A	07.02.06	New Issue	KJ/JM	
B	10.08.23	Dwg Rev updated	KJ	
C	12.04.16	Added bending, crushing & twist dimensions	KJ	
D	12.07.31	Dwg Rev updated	KJ	<i>[Signature]</i>

Item	Qty -241	Part Number	Description
1	X	D350-748-241	CROSSTUBE ASSEMBLY (AS 350/355 HI AFT)
2	1	D6015-125	CROSSTUBE (OR D6018-125)
3	2	D3502-1	SUPPORT
4	2	D3595-063-395	RUBBER CUSHION
5	1	AELS-1032-225	INSERT
6	1	NAS1149D0363J	WASHER (OR AN960JD10)
7	2	MS21920-22 OR MS21920-21	CLAMP (PER DART SPEC. M-MS21920-21/-22)
8	1	MS27039-1-10	SCREW
9	A/R	PROSEAL 890 B-2	SEALANT, AMS-S-8802 CLASS B-2

GENERAL NOTES:

- 1) MATERIAL: MANUFACTURED FROM D6015-125 OR D6018-125
FINISHED LENGTH AFTER TURNING = 124.70±0.06 (AFTER BENDING/TRIMMING = 122.70 REF)
- 2) FINISH: MAGNETIC PARTICLE INSPECT PER DART QSI 038 4.2
CADMIUM PLATE PER AMS-QQ-P-416B, CLASS 1, TYPE II
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
PAINT OUTSIDE PER DART QSI 005 4.2
- 3) TOLERANCE: PER DART QSI 018 UNLESS OTHERWISE NOTED.
WALL THICKNESS ECCENTRICITY PER DART QSI 038 7.2
MIN. ALLOWABLE WALL IS -0.020 FROM NOMINAL
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED.
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX.
- 6) IDENTIFICATION: DART PART NUMBER "D350-748-241" AND BATCH NUMBER ON INSIDE OF CUFF
PER DART QSI 044 6.4 (VIBRATING STYLUS)
- 7) WEIGHT: 29.85 lbs
- 8) PART IS SYMMETRIC ABOUT CENTERLINE, EXCEPT FOR Ø0.297 HOLE.
- 9) EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE OUTSIDE SURFACE MUST BE SMOOTH AND FREE FROM SURFACE DEFECTS SUCH AS SCRATCHES, NICKS, OR DENTS. DEFECTS UP TO 0.005" MAY BE BLENDED OUT LONGITUDINALLY. CIRCUMFERENTIAL GRIND MARKS ARE UNACCEPTABLE. WHEN DRILLING HOLES EXTREME CARE MUST BE TAKEN AND CAREFUL DEBURRING PERFORMED TO ENSURE A CLEAN HOLE WITH NO CRACKING/CHIPPING/GROOVES.

TURNING

- 10) BLEND OUT ALL EDGES FROM MACHINING LONGITUDINALLY, TRANSITION SHOULD BE SMOOTH. NOTE: ALL HOLES ARE DRILLED AFTER BENDING.
- 11) HEAT TREAT TO MIN. 180 KSI PER MIL-T-6736 OR AMS2759/1E AFTER TURNING. ACCEPTABLE TO VERIFY TENSILE STRENGTH BY HARDNESS TEST PER ASTM E18 TO 40-45 HRC.

BENDING

- 12) ALL DIMENSIONS FOR BENT TUBE ARE POST STRESS RELIEF
- 13) BEND PROGRESSIVELY WITH A MINIMUM OF 7 PASSES PER SIDE. MAXIMUM TUBE FLATTENING DUE TO BENDING IS 6% BASED ON O.D. ON TOP HALF OF BEND, AND 7% ON BOTTOM HALF OF BEND.
- 14) MAX AMPLITUDE OF RIPPLING ALONG BENT PORTION OF THE TUBE IS 0.030 (ZN A1-3)
- 15) AFTER BENDING, STRESS RELIEVE TUBE AT 650°F ±0.25°F FOR A MINIMUM OF 2 HRS AND ALLOW TO COOL TO AMBIENT TEMPERATURE (REF AMS2759/1E).
- 16) MAX TWIST AFTER STRESS RELIEF: WITH XTUBE LAYED FLAT ON SURFACE, THE DIFFERENCE BETWEEN CUFF HEIGHTS FROM THE SURFACE MAY BE NO LARGER THAN 0.38 (ZN C1-3).

ASSEMBLY

- 17) TO INSTALL D3502-1 SUPPORT: ABRASE MATING SURFACE OF SUPPORT AND CROSSTUBE WITH 180-GRIT SANDPAPER AND REMOVE RESIDUE WITH MEK (OR EQUIVALENT). APPLY A 0.02" TO 0.05" THICK LAYER OF PROSEAL 890 CLASS B-2 (OR AMS-S-8802 CLASS B-2) SEALANT TO MATING SURFACE OF SUPPORT.
- 18) TORQUE CLAMPS 60 TO 80 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING. PRIOR TO PACKAGING, RE-CHECK TORQUE ON CLAMPS AFTER PROSEAL 890 SEALANT HAS CURED FOR 72 HOURS.

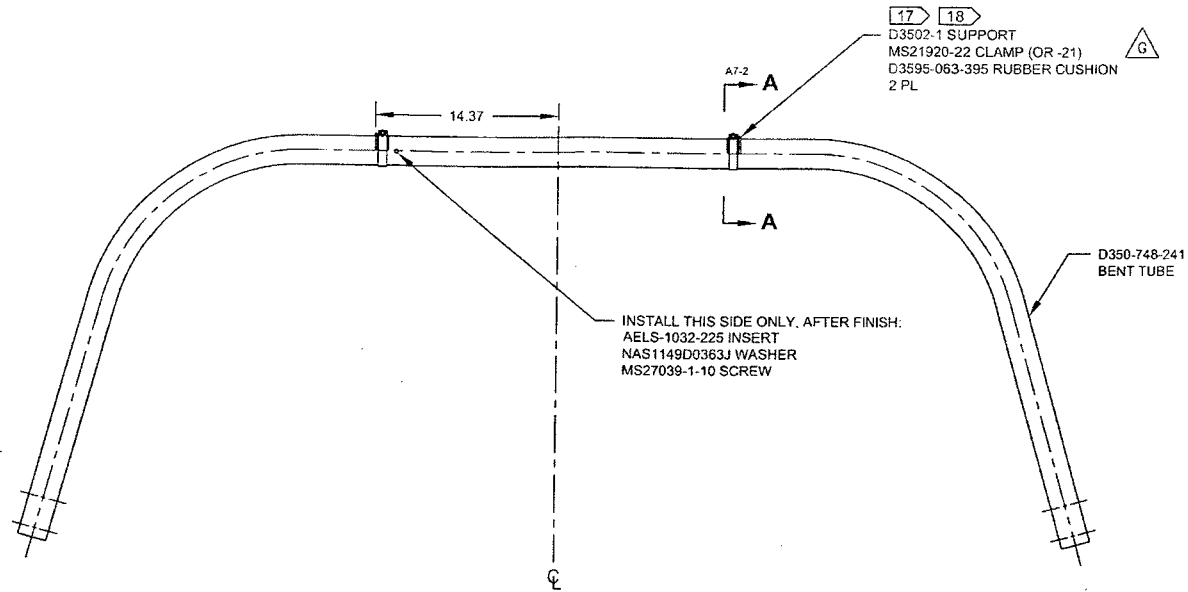
95011 MLJ
13-01-03

RELEASED
2012-11-01

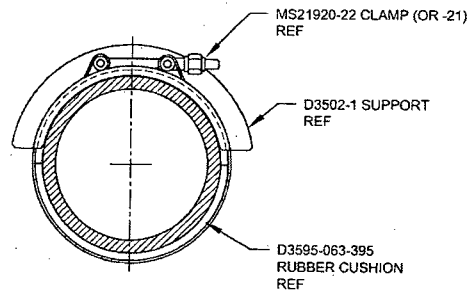
G	RMV ABRASION STRIP, SUPPORT NOW W/ PROSEAL & CUSHION, ADD STRESS RELIEF, LONGER CUFF, NOW TRIM'D AFTER BEND, ADD WALL DIMS & UPDATE TOL.	CP	12.09.12
F	ADD HRC TEST OPTION (B8-1) PER PAR 09-040, ADD TWIST LIMIT (A8-1, C1-3), ADD D6015-125 OPTION (C8-1), STOCK DIM NOW MACHINED (D1-4)	CP	10.11.23
E	REVISE GENERAL NOTES; UPDATE TO CURRENT STANDARDS: RELOCATED FLAG #6 PER PAR 08-046 (ZN A8-3); ADD TOLERANCES (ZN C6-3, D2-3)	RF	09.09.30
D	MAG. PARTICLE AND CAD PLATE AS MFD.	CP	06.10.31
C	ADD CAD PLATING	CP	06.08.14
B	ADD D6018-125 & PRIME AND PAINT	CP	06.06.30
A	NEW ISSUE	CP	06.03.31
REV.	DESCRIPTION	BY	DATE
DESIGN			
DRAWN			
CHECKED			
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	12.09.12		

DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWING NO. D350-748-241	REV. G SHEET 1 OF 4
TITLE CROSSTUBE (AS 350/355 HI AFT)	SCALE NTS
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95011



**D350-748-241
ASSEMBLY DETAIL**

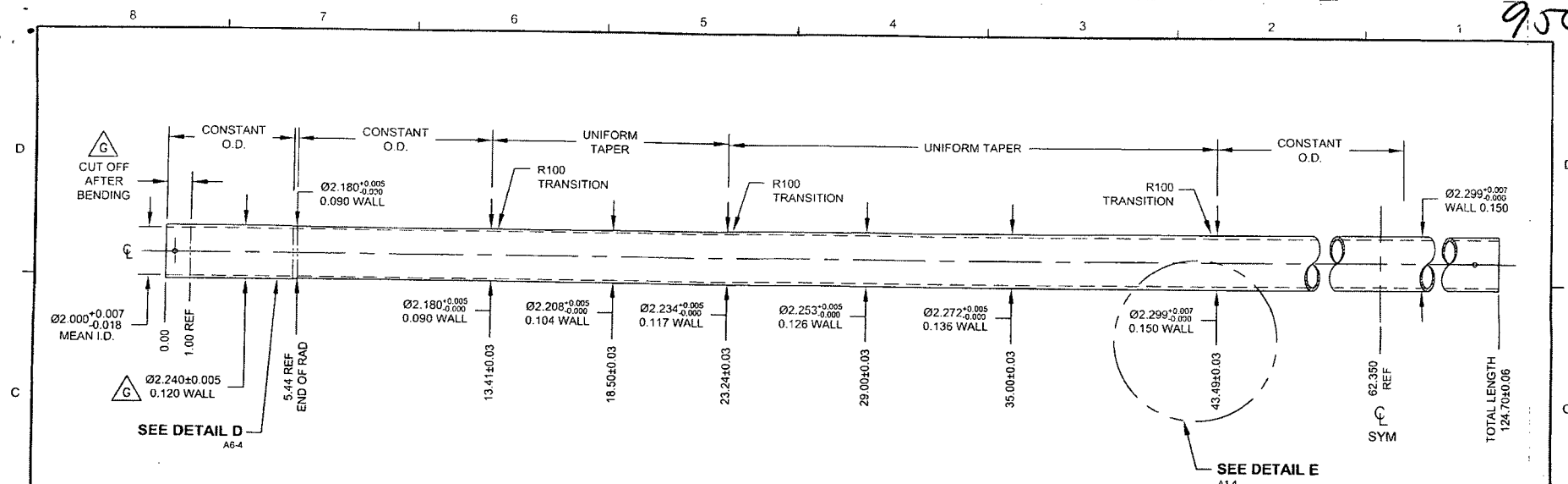


SECTION A-A D4-2
SCALE 6X

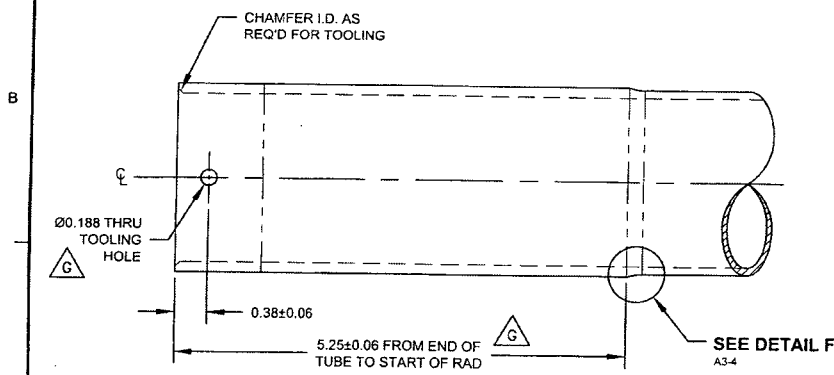
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2012-11-01

DESIGN		DART AEROSPACE LTD	
DRAWN		HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. G
MFG. APPR.		D350-748-241	SHEET 2 OF 4
APPROVED		TITLE	SCALE
DE APPR.		CROSSTUBE (AS 350/355 HI AFT)	NTS
DATE	12.09.12	<small>COPYRIGHT © 2006 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	

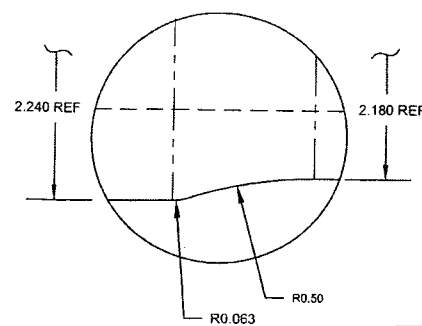
95011



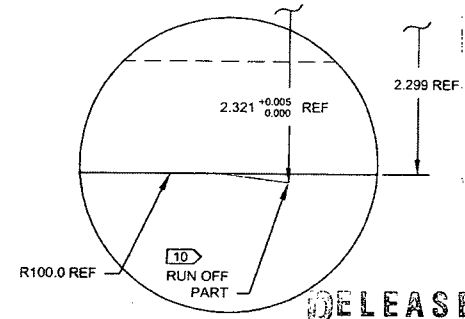
**D350-748-241TRN
TURNING DETAIL**



**DETAIL D:
CROSSTUBE CUFF** C7-4
SCALE 3X



**DETAIL F:
CUFF TRANSITION** A5-4
NOT TO SCALE



**DETAIL E:
TAPER RUN-OFF** C2-4
NOT TO SCALE

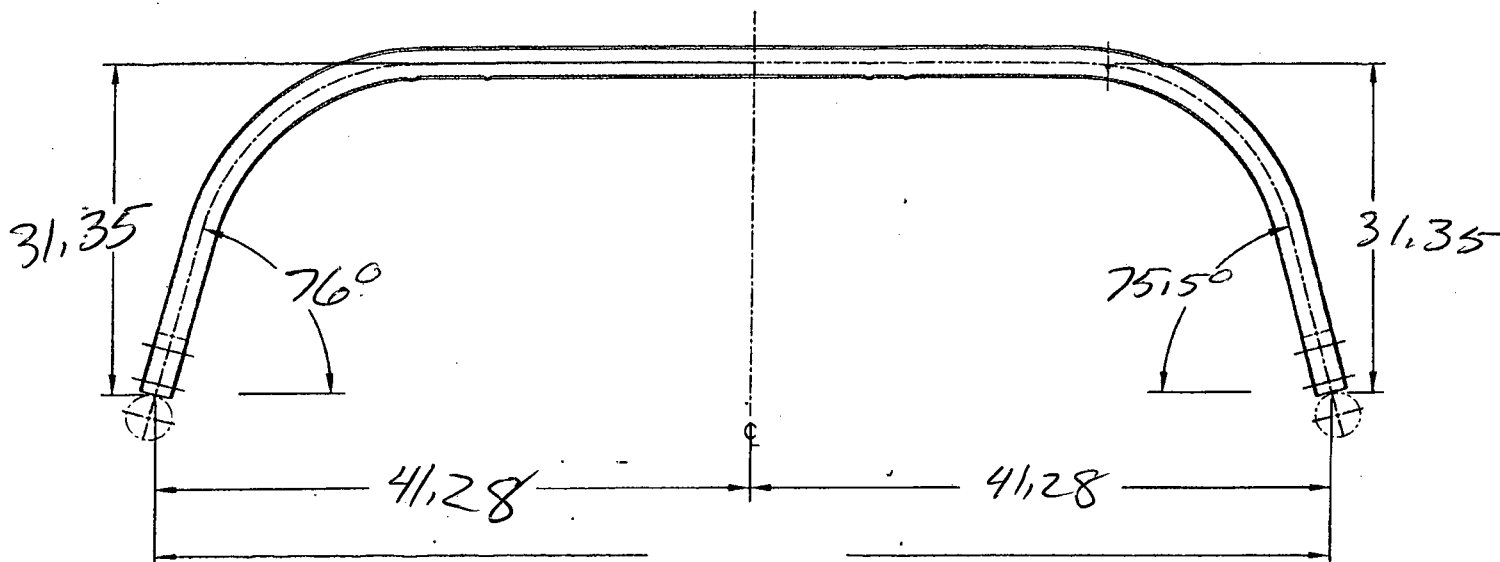
DESIGN	90	DART AEROSPACE LTD	
DRAWN	90	HAWKESBURY, ONTARIO, CANADA	
CHECKED	90	DRAWING NO.	REV. G
MFG. APPR.	90	D350-748-241	SHEET 4 OF 4
APPROVED	90	TITLE	SCALE
DE APPR.	90	CROSSTUBE (AS 350/355 HI AFT)	NTS
DATE	12.09.12	COPYRIGHT © 2006 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSES OR COMMERCE OR COMMUNICATIONS TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

RELEASED
2012-11-11

Measured Before De-Stress

DART AEROSPACE LTD	Work Order: 95011
Description: Crosstube High Aft (AS350/355)	Part Number: D350-748-201
Inspection Dwg: D350-748-241 Rev: G	Page 1 of 1

Required Dimension	Min	Max
Height	31.22	31.48
1/2 Span	40.77	41.03
Angle	75	77
Total Span	81.54	82.06
Bending Passes	7	--
Crushing	--	6%
Twist	--	0.25



	Side A	Side B
Bending Passes	40	39
Crushing		
Comments		
Twist 0.000		

13-3-11

QC15 Inspection	
Date	

Rev	Date	Change	Revised by	Approved
A	07.02.06	New Issue	KJ/JM	
B	10.08.23	Dwg Rev updated	KJ	
C	12.04.16	Added bending, crushing & twist dimensions	KJ	
D	12.07.31	Dwg Rev updated	KJ	
E	13.02.27	Dwg Rev updated	KJ	

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width: 25%;">Skid-tube <input type="checkbox"/></td> <td style="width: 25%;">Crosstube <input type="checkbox"/></td> <td style="width: 25%;">Water Jet <input type="checkbox"/></td> <td style="width: 25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																								
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>																								
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>																								
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																									
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector																		
Doc/Data <input type="checkbox"/>																											
Equip/Tooling <input type="checkbox"/>																											
Operator <input type="checkbox"/>																											
Material <input type="checkbox"/>																											
Setup <input type="checkbox"/>																											
Other <input type="checkbox"/>																											
Process <input type="checkbox"/>																											
Supplier <input type="checkbox"/>																											
Training <input type="checkbox"/>																											
Unapproved <input type="checkbox"/>																											
FAULT CATEGORY																											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other																		

METCOR INC.

560 BOUL. ARTHUR-SAUVÉ
ST-EUSTACHE, QC, J7R 5A8

Tel: 450-473-1884 / Fax: 450-491-5498

Certificat de Conformité Détaillé

Detailed Certificate of Compliance

BON DE TRAVAIL order	CHARGEMENT load
184537	1

CLIENT / customer 215

DART AEROSPACE
1270 ABERDEEN
HAWKESBURY

ON K6A 1K7

LIVRÉ À / shipped to:

DART AEROSPACE
1270 ABERDEEN
HAWKESBURY

ON K6A 1K7

1

COMMANDE DU CLIENT customer po	BON DE LIVRAISON DU CLIENT customer shipper no.	MATÉRIEL material	CODE DE TRAITEMENT mat'l heat code	NUMÉRO DE LOT lot number
PO 19308		Steel		

SPÉCIFICATIONS DU PROCÉDÉ processing specifications

STRESS REL

SAE AMS 2759/1 REV.E

EXIGENCE / requirement	SPÉCIFICATIONS / specified	TESTS EXÉCUTÉS / performed	RÉSULTATS DE TESTS / results
Visual			

QUANTITÉ quantity	POIDS weight	DESCRIPTION DES PIÈCES parts description
3	90	D350-748-201 (1) CROSSTUBE REFERENCE 95007 (1) D350-748-201 CROSSTUBE REFERENCE 95008 (1) D350-748-201 CROSSTUBE REFERENCE 95011 CONTENANT: 1 NIL

Operation	Temp. spécifiée Specified Temp	Temps de trempe Spécifié Specified Soak Temp	Atmosphere	Carbone Carbon Potential	Q-Media Q-Temp	Four # Furnace #	Date Départ Start Date	Heure d'entrée Time In	Heure de sortie Time Out	Date Complétée Date complete
1.00 CONT. INIT.	LAVAGE		si nécessaire							
2.00 PREPARING	COMPTAGE									
3.00 STRESS RE	43°C+/-6°C	2:00	air			701				

METCOR INC.

560 BOUL. ARTHUR-SAUVÉ
ST-EUSTACHE, QC, J7R 5A8

Tel: 450-473-1884 / Fax: 450-491-5498

Certificat de Conformité Détaillé

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184537	1

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1270 ABERDEEN
HAWKESBURY

ON K6A 1K7

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DART AEROSPACE
1270 ABERDEEN
HAWKESBURY

ON K6A 1K7

Operation	Temp. spécifiée Specified Temp	Temps de trempe Spécifié Specified Soak Temp	Atmosphere	Carbone Carbon Potential	Q-Media Q-Temp	Four # Furnace #	Date Départ Start Date	Heure d'entrée Time In	Heure de sortie Time Out	Date Complétée Date complete
4.00 FINAL INSP							03-13-2013			03-13-2013

COMMENTAIRES / comments

LES TRAITEMENTS THERMIQUES SUR CETTE COMMANDE A ÉTÉ FAIT EN UTILISANT DES ÉQUIPEMENTS EN CONFORMITÉ AVEC LES REQUIS DE LA SPÉCIFICATION AMS2759.
TOUTES LES OPÉRATIONS DE TRAITEMENT THERMIQUE ONT ÉTÉ FAITES EN CONFORMITÉ AVEC LES REQUIS DE LA SPÉCIFICATION DEMANDÉE ET TOUTES LES VÉRIFICATIONS ET LES TESTS DEMANDÉES ONT ÉTÉ FAITES ET DOCUMENTÉES.
AUCUN CHANGEMENT OU DÉROGATION N'A ÉTÉ FAITE PAR RAPPORT AU TRAITEMENT THERMIQUE DEMANDÉ.
ON CERTIFIE QUE LE MATÉRIEL A ÉTÉ FABRIQUÉ, ÉCHANTILLONNÉ, TESTÉ ET INSPECTÉ EN ACCORD AVEC LES SPÉCIFICATIONS DU MATÉRIEL ET LE BON DE COMMANDE ET LE MATÉRIEL RENCONTRE LES EXIGENCES SPÉCIFIÉS.

ACCOMPLISHED USING HEAT TREATMENT EQUIPMENT THAT MEETS THE REQUIREMENTS OF AMS 2759. ALL THE HEAT TREATMENT OPERATIONS WERE ACCOMPLISHED IN ACCORDANCE WITH THE REQUESTED/REQUIRED HEAT TREATMENT SPECIFICATION AND ALL REQUIRED VERIFICATIONS TEST HAVE BEEN PERFORMED AND DOCUMENTED. NO UNAUTHORIZED CHANGES OR ALL THE HEAT TREATMENT PROCESSING PERFORMED ON THIS ORDER WAS DEVIATIONS TO REQUIRED HEAT TREATMENT SPECIFICATIONS OR PROCEDURES HAVE BEEN PERFORMED.
WE CERTIFY THAT THE MATERIAL WAS MANUFACTURED, SAMPLED, TESTED AND INSPECTED IN ACCORDANCE WITH THE MATERIAL SPECIFICATION AND THE PURCHASE ORDER AND WAS FOUND TO MEET THE REQUIREMENTS.

APPROUVÉ par / Approved by:

Isabel Olen

DATE: 2013-03-13



/ Nous certifions que toute l'information comprise sur ce rapport est exacte et conforme aux requis du client. / We certify that all the information on this report is exact and in accordance with the order requirements.

**CERTIFICATE OF
CONFORMANCE**

**CADORATH PLATING CO. LTD.
2150 LOGAN AVENUE
WINNIPEG, MANITOBA R2J-0J1**

DATE: Apr-08-2013

CONSIGNEE TO: Dart Aerospace Ltd.
1270 Aberdeen St.
Hawksbury, ON K6A 1K7

W/O #: 123431

INVOICE #: 65407

**CONTRACT OR
PURCHASE ORDER #** PO19388

DESCRIPTION: CROSSTUBE

P/N # D350-748-201

S/N # 95011

QTY 1

MPI IAW ASTM-E-1444. CADMIUM PLATING IAW AMS-QQ-P-416C
TYPE 2 YELLOW CLASS 1. FINAL MPI IAW ASTM-E-1444. BAKE
HEAT CHART # 13-286 AND # 13-307.

8/3/04/4

CERTIFICATE: I certify that the items indicated here on have
been inspected and tested and conform to all specifications
and requirements detailed on the contract or purchase order.



Approved Inspector:

A handwritten signature in black ink, consisting of several loops and a long horizontal stroke.



LIQUID PENETRANT TEST REPORT

P- 12166

CLIENT Dart Aerospace DATE April 15 2013 PAGE 1 OF 1
ATTENTION Chentale, Linda, Andy ACUREN JOB NO. 188-13-C0240 TIME AM ☒ PM ☐
ADDRESS 1270 Aberdeen St, PO/WO No. As Address
Hawickasbury, on WORK LOCATION As Address
PROJECT Pt-wet Fluorescent Liquid penetrant Inspection ACCEPTANCE STD. ASTM 1417/1418/1419 REV./DATE 2005
ITEM(S) EXAMINED -See Below

JOB DESCRIPTION PROCEDURE No. LT-002 REV./DATE 2009 TECHNIQUE No. LT-002 REV./DATE 2009
PART No. MATERIAL 4/s THICKNESS ---
SCOPE Performed a wet Fluor L.P.I. on 100% of the external surface only on
Items mentioned below

TEST DETAILS
METHOD ☒ FLUORESCENT ☐ VISIBLE ☒ WATER WASH ☐ SOLVENT REMOVABLE ☐ POST EMULSIFIED
FAMILY BRAND Messing Flux BLACK LIGHT S/N 15790 ☐ OUTPUT > 1000 μ W/cm² ☐ AMBIENT < 2 fc
PENETRANT ZL-87 MINIMUM DWELL TIME 95 MIN. LIGHTING EQUIP. ☐ FLASHLIGHT ☐ TROUBLELIGHT ☐ OUTPUT > 100 fc @ SURFACE
PENETRANT REMOVER H2O MINIMUM DRY TIME >10 MIN. OTHER
DEVELOPER ZP-9F MINIMUM DWELL TIME 30 MIN. LIGHT METER S/N 1092866 CAL DUE DATE oct 2013
DEVELOPER TYPE ☒ NON AQUEOUS ☐ AQUEOUS ☐ DRY

TEST SURFACE
SURFACE CONDITION ☐ AS GROUND ☐ AS WELDED ☒ MACHINED ☐ SHOT BLASTED ☒ CLEAN BARE METAL
SURFACE TEMPERATURE ☐ < - 4°C/ 20°F ☐ - 4°C/ 20°F TO 10°C/50°F ☒ 10°C/50°F TO 52°C/125°F ☐ > 52°C/125°F

RESULTS- (<input type="checkbox"/> METRIC <input type="checkbox"/> IMPERIAL)		ACCEPT	REJECT
ITEM	COMMENTS		
1	Cross tube inst, High Aft w.o ID 95008	X	Item ID D350-748-201 Indications
2	Cross tube inst, High Aft w.o ID 95010	X	Item ID D350-748-201 Indications
3	Cross tube inst, High Aft w.o ID 95011	X	Item ID D350-748-201 Indications
4	Cross tube inst, High Fuel w.o ID 95010	X	Item ID D350-748-101 Indications
5	Cross tube inst, High Fuel w.o ID 95012	X	Item ID D350-748-101 Indications
6	Cross tube inst, High Aft w.o ID 97067	X	Item ID D350-748-201 Indications
7	Cross tube inst, High Aft w.o ID 97068	X	Item ID D350-748-201 Indications

Scope of Services
The agreement of Acuren Group Inc. to perform services extends only to those services provided for in writing. Under no circumstances shall such services extend beyond the performance of the requested services. It is expressly understood that all descriptions, comments and expressions of opinion reflect the opinions or observations of Acuren Group Inc. based on information and assumptions supplied by the owner/operator and are not intended nor can they be construed as data or other information provided by Acuren Group Inc. In no event shall Acuren Group Inc.'s liability in respect of the services referred to herein exceed the amount paid for such services.
In performing the services provided, Acuren Group Inc. uses the degree, care and skill ordinarily exercised under similar circumstances by others performing such services in the same or similar locality. No other warranty, expressed or implied, is made or intended by Acuren Group Inc.

SIGNATURES
CLIENT REPRESENTATIVE Andy Sheldon DTR # E-120399
TECHNICIAN (SIGNATURE): Alexandre Michaud SIGNATURE
NAME (PRINT): Alexandre Michaud REPORT REVIEWED BY:
1st TECHNICIAN 2nd TECHNICIAN
CGSB LEVEL 2 SNT LEVEL 2 CGSB LEVEL SNT LEVEL
CGSB REG. No 10140 CGSB REG. No

WHITE - CLIENT COPY

CANARY - OFFICE COPY

PINK - TECHNICIAN COPY

GOLD - OFFICE COPY

**CERTIFICATE OF
CONFORMANCE**

**CADORATH PLATING CO. LTD.
2150 LOGAN AVENUE
WINNIPEG, MANITOBA R2J-0J1**

DATE: May-13-2013

CONSIGNED TO: Dart Aerospace Ltd.
1270 Aberdeen St.
Hawksbury, ON K6A 1K7

W/O #: 124599
INVOICE #: 65948

**CONTRACT OR
PURCHASE ORDER #** PO19783

DESCRIPTION: CROSSTUBE

QTY 1

P/N # D350-748-201

S/N # 95011

STRIP IAW MIL-STD-871. CADMIUM PLATING IAW AMS-QQ-P-416C
TYPE 2 YELLOW CLASS 1. MPI IAW ASTM-E-1444. BAKE HEAT
CHART # 13-415 AND # 13-428.

CERTIFICATE: I certify that the items indicated here on have
been inspected and tested and conform to all specifications
and requirements detailed on the contract or purchase order.



Approved Inspector:

A handwritten signature in dark ink, appearing to be a stylized 'Z' or 'S' shape.



LIQUID PENETRANT TEST REPORT

P- 09103

CLIENT

ATTENTION

ADDRESS

PROJECT

ITEM(S) EXAMINED

DATE

ACUREN JOB NO.

PO/WO NO.

WORK LOCATION

ACCEPTANCE STD.

PAGE

OF

TIME

AM

PM

DART AERO SPACE
ANDY SHELTON
1220 ABERDEEN ST.
NANKESBURY ON.

MAY 17/13
188-13-C0098
11926 -
SAME
ASTM 1417/Q1-03B REV./DATE 2005

F.P.I. on CROSS TUBES

10

JOB DESCRIPTION

PART NO.

SCOPE

PROCEDURE NO. LT-002 REV./DATE 2008 TECHNIQUE NO. LT-002 REV./DATE 2008
MATERIAL STEEL THICKNESS VARIOUS
A WET FLUORESCENT INSPECTION WAS CARRIED OUT ON THE
SURFACE ONLY 100% WITH (DYE)

TEST DETAILS

METHOD ☒ FLUORESCENT ☐ VISIBLE ☒ WATER WASH ☐ SOLVENT REMOVABLE ☐ POST EMULSIFIED
FAMILY BRAND MAX N+FLUX BLACK LIGHT S/N 16459 ☐ OUTPUT > 1000 μ W/cm² ☐ AMBIENT < 2 fc
PENETRANT 2LG7 MINIMUM DWELL TIME 10 MIN. LIGHTING EQUIP. ☐ FLASHLIGHT ☐ TROUBLELIGHT ☒ OUTPUT > 100 fc @ SURFACE
PENETRANT REMOVER H₂O MINIMUM DRY TIME > 10 MIN. OTHER
DEVELOPER SKD 12 MINIMUM DWELL TIME 10 MIN. LIGHT METER S/N CAL DUE DATE
DEVELOPER TYPE ☒ NON AQUEOUS ☐ AQUEOUS ☐ DRY

TEST SURFACE

SURFACE CONDITION ☐ AS GROUND ☐ AS WELDED ☒ MACHINED ☐ SHOT BLASTED ☒ CLEAN BARE METAL
SURFACE TEMPERATURE ☐ < -4°C/20°F ☐ -4°C/20°F TO 10°C/50°F ☒ 10°C/50°F TO 52°C/125°F ☐ > 52°C/125°F

RESULTS-

☒ METRIC ☐ IMPERIAL

ITEM	COMMENTS	ACCEPT	REJECT
1	CROSS TUBE - W.O. #		
1	" " 97119	✓	
1	" " 95011	✓	
1	" " 95003		X
1	" " 97065	✓	
1	" " 95010	✓	
1	" " 97067	✓	
1	" " 95009	✓	
1	" " 95041	✓	
1	" " 97068	✓	
1	" " 95004	✓	

Scope of Services
The agreement of Acuren Group Inc. to perform services extends only to those services provided for in writing. Under no circumstances shall such services extend beyond the performance of the requested services. It is expressly understood that all descriptions, comments and expressions of opinion reflect the opinions or observations of Acuren Group Inc. based on information and assumptions supplied by the owner/operator and are not intended nor can they be construed as representations or warranties. Acuren Group Inc. is not assuming any responsibilities of the owner/operator and the owner/operator retains complete responsibility for the engineering, manufacture, repair and use decisions as a result of the data or other information provided by Acuren Group Inc. In no event shall Acuren Group Inc.'s liability in respect of the services referred to herein exceed the amount paid for such services.

Standard of Care
In performing the services provided, Acuren Group Inc. uses the degree, care and skill ordinarily exercised under similar circumstances by others performing such services in the same or similar locality. No other warranty, expressed or implied, is made or intended by Acuren Group Inc.

SIGNATURES

CLIENT REPRESENTATIVE: Andy Sheldon (PRINT) Signature: [Signature]
TECHNICIAN (SIGNATURE): [Signature]
NAME (PRINT): Mike Johnson
CGSB LEVEL 1ST TECHNICIAN CGSB REG. No. 6606
CGSB LEVEL 2ND TECHNICIAN CGSB REG. No. [Blank]
DTR # E-02100
REPORT REVIEWED BY: [Blank]
NAME INITIALS

WHITE - CLIENT COPY

CANARY - OFFICE COPY

PINK - TECHNICIAN COPY

GOLD - OFFICE COPY

PT Sept 2005

95011

Work Order ID 95011

January-02-13 11:50:24 AM

Item ID: D350-748-201

Accept

N900040100

Setup Start ***NS1***

Stop ***NS2***

Revision ID:

Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 1/21/13 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Run Start ***NR1***

Stop ***NR2***

Approvals: Process Plan: *MLJ*
QC:

Date: *13-01-03* Tooling:

Date:

Date: SPC (Y/N):

Date:

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

Draw Nbr Revision Nbr

D350-748-241 G

100

100

DC

Document Control

DOCUMENT CONTROL

Memo

Photocopy bluefile & type labels per PPPD350-748-201 CHG003

0.00

0.00

110

110

CNC Bend 2

CNC Alpha 160 Bender

BENDING MACHINE - CROSSTUBES

Memo

Bend tube as per Dwg D350-748-241 using CNC bender program D350A and Folio FT

*****UNDER BEND .225" PER SIDE*****

****USE (4) DT9824 SHIM BLOC TO CHECK STRAIGHTNESS****

0.00

0.00

MLJ 13-05-28

13-3-11